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DI		DESIG	R UTILITY OR N LICATION	Attorney Docket Number 10/533796  First Named Inventor Yoshitaka MIYAKAWA  COMPLETE IF KNOWN						
$\boxtimes$		7 CFR		Application Number Filing Date						
	with Initial Filing	OR	Filing (surcharge (37 CFR 1.16(e))	Group Art Unit						
			required)	Examiner Name						

		Exami	ici itailic							
				atur.						
As a below named Inventor, I hereby declare that:										
My residence, post office address, and citizenship are as stated below next to my name.										
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:										
ANIMAL MODEL OF HUMAN HEMATOPOIETIC TUMOR										
L		(Title of the Ir	nvention)		W WITH SALES					
the specification of which is attached hereto OR										
was filed on (MM/	DD/YYYY)		as United	States Applica	ation Number or P	CT International				
Application Number	and was amende	ed on (MM/DD/YYYY)	(if applica	ible).						
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.										
I acknowledge the duty to d	isclose information	which is material to pate	entability as defi	ned in 37 CFF	R 1.56.					
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or _365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.										
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Prior Not Cla		Certified Co	py Attached? NO				
2002-322995	Japan	11/06/2002				⊠				
		listed on a supplementa				to:				
I hereby claim the benefit u				lication(s) liste	ed below.	· · · · · · · · · · · · · · · · · · ·				
Application Numbe	ır(s)	Filing Date (MM/DD	(YYYY)	numb suppl	ional provisional a pers are listed on a emental priority d SB/028 attached	a ata sheet				
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(Page 1 of 2)

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## **DECLARATION** — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of the application is not designated in the prior United States or PCT international application in the manner provided by the first paragraph of 31 U.S.C. 112. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

between the filing date of the prior application and the national or PCT international filing date of this application.												
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Name of Sole	•					A petition	has be	een filed for	this unsigr	ned inve	entor	
Giver	n Name	(first and middl	e (if an	y)				Family Nar	ne or Surn	ame		
		Yoshitaka.	·					MIY	AKAWA			
Inventor's Signat	ure	y.	M	szak	ana				Date	Apı	.21, 2005	; 
Residence: City Shinjuku			入 一	State Tokyo				Japan Citize		enship Japan		
Post Office Addre	ess	c/o School of	Medici	ne, KEIO	UNIVER	SITY, 35	Shinar	no-machi, Sh	injuku-ku,			_
Post Office Addre	ess	Tokyo 160-858	32, Jap	an								
City		Shinjuku	S	tate	Tokyo	ZIP		160-8582	Count	ry	Japan	
□ Additional inve	ntors a	e being named o	n the 2	supplem	ental Add	ditional Inv	entor(s	) sheet(s) PT	O/SB/02A a	attached	hereto:	



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## **DECLARATION**

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 1 of 2

Name of Additional Joint Inventor, if any:				A petition has been filed for this unsigned inventor							
Given Name (first and middle (if any)				Family Name or Surname							
		KIZAKI									
Inventor's Signature Masafue				iù			Date Apr. 21, 2005			2005	
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Post Office Address	Tokyo 160-8582,	Japan				· <del>-</del>					
City	Shinjuku	State	Tok	yo	ZIP	160-8582	Country		Japa	n	
Name of Additional			A petition h	nas been filed fo	r this unsig	ned i	inventor				
Given Name (first and middle (if any)				Family Name or Surname							
Yasuo				IKEDA							
Inventor's Signature	, 4	asu	her	<u>(</u>			Date	Apr	. 21,	2005	
City	Shinjuku	State	Tok	yo	Country	Japan	Citizensl	hip	Japan		
Post Office Address	c/o School of Me	dicine, KEI	O UNIVERSITY, 35, Shinano-machi, Shinjuku-ku,								
Post Office Address	Tokyo 160-8582,	Japan									
City	Shinjuku	State	Tok	yo	ZIP	160-8582	Country		Japa	חו	
Name of Additional	Joint Inventor,	if any:			A petition h	nas been filed fo	r this unsig	ned	inventor		
Given Name	(first and middle (i	f any)	Family Name or Surname								
	Masato		NAKAMURA								
Inventor's Signature	Masi	to In sh	ana	a			Date	Apr	. 21,	2005	
City	Setagaya	State	Tok	yo	Country	. Japan	Citizensl	hip	Japan		
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Post Office Address	Post Office Address										
City	Setagaya	State	Tok	yo	ZIP	158-0081	Country		Japa	ın	

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## **DECLARATION**

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 2 of 2

Name of Additional Joint Inventor, if any:				A petition has been filed for this unsigned inventor						
Given Name (first and middle (if any)				Family Name or Surname						
Yasuyuki				OHNISHI						
Inventor's Signature		olimi				Date	Date Apr. 21, 200			
Residence: City	Yokohama	State	Kanaga	EWE.	Country	Japan	Citizenship		Japan	
Post Office Address	25-1, Tana-cho, A	okoham	a-shi,	Kanagawa	227-0064, Japa	ın				
Post Office Address										
City	Yokohama	Kanag	etwea.	ZIP	Japan	Country		Japan		
Name of Additional	Joint Inventor,	if any:		A petition has been filed for this unsigned inventor						
Given Name	(first and middle (if	any)	•			Family Nam	e or Surnan	ne		
Inventor's Signature			_				Date	,		
City		State		Country		Citizenship				
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Name of Additional	Joint Inventor,	if any:	A petition has been filed for this unsigned inventor							
Given Name	(first and middle (if	any)	Family Name or Surname							
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